

Letters to the editor

REGARDING MANAGING EROTIC AND EROTICIZED TRANSFERENCE

DEAR EDITOR:

I would like to add to the discussion of transference and countertransference that sparked after the publication of Drs. Ladson's and Welton's article, "Recognizing and Managing Erotic and Erotized Transferences" [*Psychiatry* 2007;4(4):47–50].

In their article, Drs. Ladson and Welton explain how novice therapists can have difficulties negotiating boundaries and what the potential consequences of these transgressions may be.

Then Dr. Edwards writes, in a letter to the editor [*Psychiatry* 2007;4(5):16], that transference and countertransference reactions occur exclusively in "psychoanalytically oriented settings." Hence, I would argue that although the analysis of transference is of utmost importance for psychodynamically oriented therapies, it is not exclusive to them.

It is not a rarity to find the obnoxious or overpleasing patient in any regular medical ward or outpatient clinic and the caring/empathic family doctor having far more good treatment outcomes than his condescending coworker.

Therefore, it is not only our duty but our responsibility as psychiatrists to aid our non-psychiatric colleagues in identifying and navigating these complex reactions that can occur in any doctor-patient relationship.

With regards,

Julian Bravo, MD
Anderson, South Carolina